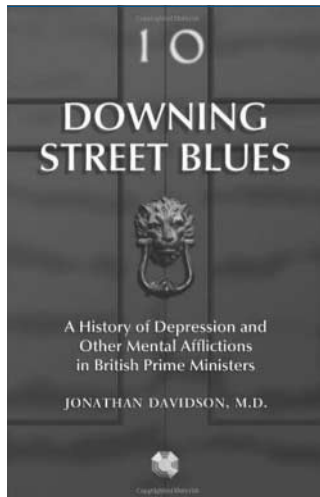


## Book reviews

Edited by Allan Beveridge, Femi Oyeboode  
and Rosalind Ramsay



**Downing Street Blues:  
A History of Depression  
and Other Mental  
Afflictions in British  
Prime Ministers**

By Jonathan Davidson.  
McFarland. 2011.  
US\$45.00 (pb). 228pp.  
ISBN: 9780786448463

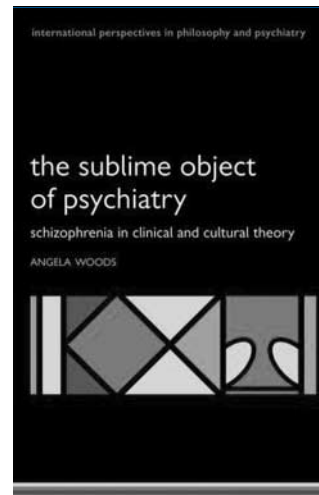
Starting with Walpole in 1721, *Downing Street Blues* finishes with Blair in 2007. It is directed at specialist and general readers and its plain language, remarkably free of jargon, means it should have wide appeal. It is also appropriate that its author, Jonathan Davidson, trained as a psychiatrist in the UK before moving to the USA. Also that he, with two colleagues at Duke University, was the author of a widely respected study of psychiatric disorders and their effects on all US presidents up to Richard Nixon. Among British prime ministers, 72% had psychiatric problems at some time in their lives.

Davidson asserts he had access to more extensive biographical detail on which he based his assessment in the UK. The most fascinating of the prime ministers written about is Gladstone and, understandably for the Grand Old Man of British politics, it is also the longest entry. Gladstone experienced 15 depressive episodes and while there was mania, the author writes, 'it is unlikely that he succumbed to the greater extremes of bipolar disorder, but milder manic (i.e. hypomanic) forms of illness are distinctly possible, and his temperament is quite in keeping with this notion'. Self-flagellation and his religious zeal to 'save' women led to numerous encounters with prostitutes. In 1851, he set up 12 meetings with one particular woman in a 3-week period and spent two 'strange, questionable hours with her after which he flogged himself'. In 1852–1853 he had 120 encounters. When a man tried to blackmail him, he 'brazenly marched the man to a police station'. His extraordinary relationship with the 'courtesan' Mrs Thystlethwaite which lasted from 1864 till 1870 meant he 'pushed the concept of platonic love to the extreme' and they explored spiritualism together.

There are many other captivating pictures of politicians working through their mental illness and in some cases being strengthened in their role as prime minister. This book is important in convincing the general public that mental illness is not something to be ashamed of or hushed up. Rather, it is common and affects people in all walks of life, and can be managed and even controlled.

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**The Sublime Object  
of Psychiatry:  
Schizophrenia in Clinical  
and Cultural Theory**

By Angela Woods.  
Oxford University Press. 2011.  
£34.99 (pb). 272pp.  
ISBN: 9780199583959

Woods is very clear at the outset of this book what her aims are: 'a study of schizophrenia in theoretical texts . . . of how the concept of "schizophrenia" is represented in specific disciplines, and of how, at the meta-discursive level, these representations reveal some of the complex relations between the disciplines' (p.2). For this purpose, the term 'sublime' refers to 'something that exceeds or exists beyond our capacity for comprehension and representation' (p.8), and 'because it threatens to overwhelm our sense of self, the sublime initially inspires in its subjects feelings of awe and terror, but these . . . are then superseded by the sense of delight that comes from mastering the perceived threat' (p.8).

The first section of this book deals with clinical theories deriving from Kraepelin and Freud. Woods correctly sums up the position with regard to our understanding of the pathophysiology and treatment of schizophrenia, namely that there is much yet to learn and that no cure exists at present. But, she understates the progress in knowledge since Kraepelin's day. For one, treatments are by any definition better, even if there are troubling side-effects and incomplete benefit. The main issue is that while correctly summing up, although correct in her summing up, Woods tends towards exaggeration. For instance, she says that within psychiatry schizophrenia is 'framed as an opaque and bizarre disorder of unknown or unknowable aetiology, it exceeds and thus marks disciplinary limits as a form of unreason which can be neither adequately represented nor analytically mastered' (p.63).

Central to her examination of the psychoanalytic understanding of schizophrenia are Freud and Lacan's analyses of Daniel Schreber's *Memoirs of My Nervous Illness*. Woods' point is that these analyses are dependent on text, indeed a particular and singular text, and that, like all literary texts, Schreber's *Memoirs* supports manifold interpretations and is seemingly symbolically inexhaustible. She deems it a sublime text within psychoanalysis.

The second section deals with cultural theory starting off with the antipsychiatry movement, focusing on Szasz, Laing, and the duo of Deleuze and Guattari. These writers serve only as a prelude to Woods' exploration of the works of Louis Sass and Baudrillard. She expends considerable time on Bret Easton Ellis' novel *Glamorama*. There is a growing body of work that equates modernity and/or postmodernity with schizophrenia. It is never clear whether these cultural analyses are using schizophrenia as a metaphor, that is, are taking aspects of the experience of patients who experience schizophrenia and carrying these over to describe features of modern or postmodern society. Sometimes, the arguments veer in the direction of merging the tenor with the vehicle, a form of concretisation of a poetic image. At other times,